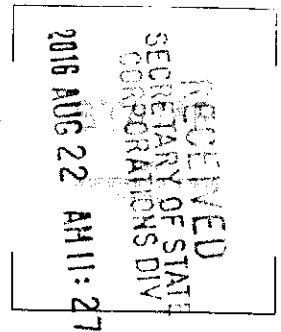




State of Rhode Island and Providence Plantations
Department of State - Business Services Division
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov



Statement of Change of Registered Agent
Business Corporation
Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number 7052		2. Exact Name of the Corporation Develco Apartments, Inc	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address City/Town State RHODE ISLAND Zip			
4. The address of the NEW registered office is: Street Address (<u>NOT</u> a P.O. Box) 50 WEDLY AVENUE Hedly Ave City/Town CENTRAL FALLS State RHODE ISLAND Zip 02803			
5. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: ROSE CRUZ			
6. The name of the NEW registered agent is: ROSE CRUZ			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONLY ONE BOX ☒ Date received (Upon filing) ☐ Later effective date (Date must be no more than 30 days from the day of filing) _____			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation Rose Cruz		Date 8-22-16	
Signature of Authorized Officer of the Corporation Rose Cruz SIGN DOCUMENT HERE			

FILED

AUG 22 2016

11:27

By **KC 11646666**